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DECISION MAKING PROCESS OF OLDER ADULTS WITH KNEE OSTEOARTHRITIS ABOUT RECEIVING PHYSICIAN-RECOMMENDED TOTAL KNEE ARTHROPLASTY

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Statement of the Problem: Osteoarthritis (OA) is the most common form of arthritis, affecting mostly older adults. Among all OA sites, knees are most commonly affected. For OA patients with joint symptoms that substantially impact their quality of life and are refractory to non-surgical treatment, joint-replacement surgery should be considered. However, older people with severe knee OA commonly refuse total knee arthroplasty (TKA). It is unclear how older OA patients in Taiwan decide the surgery. The purpose of this study was to explore the decision making process regarding joint-replacement surgery among older people with OA.

Methodology & Theoretical Orientation: A qualitative research design was used. Orthopedic outpatients were included in the study if they met the following criteria:

1) diagnosed with knee OA and recommended by their physicians to undergo knee joint-replacement surgery, 2) 60 years old, and 3) able to communicate. Participants were recruited by convenience from two medical centers and one regional hospital in northern Taiwan. Data were collected in individual interviews using a semi-structured guide and analyzed by thematic analysis. Finding: Participants' core concerns (N=79) were related to OA pain and walking ability. If they felt OA pain was bearable and they still could walk, they would try to delay TKA. Despite other factors (e.g., surgery-related concerns, physical condition-related concerns, relatives' or friends' negative TKA experiences) playing a role in decision making, older patients' final decision relied mainly on their OA pain and walking ability.

Conclusion & Significance: These findings highlight the importance of relieving OA pain and enhancing physical function among older people with severe knee OA.